

## INSTRUCTIONS FOR COMPLETING THIS STATEMENT (VA FORM 21-527)

(Detach and Retain Instructions)

PRIVACY ACT INFORMATION: No allowance of compensation or pension may be granted unless this form is completed fully as required by existing law (38 U.S.C. Chapters 11 and 15). The responses you submit are considered confidential, (38 U.S.C. 5701). They may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22, Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine maximum benefits under the law. Information submitted is subject to verification through computer matching programs with other agencies.

Income information and employment information furnished by you will be compared with information obtained by VA from the Secretary of Health and Human Services or the Secretary of the Treasury under clause (viii) of section 6103(1)(7)(D) of the Internal Revenue Code of 1986. Any information provided by you including your Social Security Number, may be used in matching programs conducted in connection with any proceeding for the collection of an amount owed the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs.

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

## **GENERAL INSTRUCTIONS**

## NOTE: PLEASE READ VERY CAREFULLY.

If you need information about the meaning of any question, contact your nearest VA regional office. If additional space is needed for any item, use Item 24, Remarks, page 6 or number a separate sheet of paper to correspond to the items you are answering and attach the sheet to the application.

A. DISABILITY PENSION is paid for permanent and total disability not resulting from service in the armed forces. Pension is paid only to veterans of wartime service.

Benefits may only be paid from the date of receipt of your application in VA unless you were incapacitated because of a disability which prevented you from filing a claim for a period of at least 30 days beginning with the date you became permanently and totally disabled. If you want this claim considered as a claim for retroactive payment, so indicate in Item 24, Remarks, and identify the specific disability which prevented you from filing.

B. REPRESENTATION. You may be represented, without charge, by an accredited representative of a veterans organization or other service organization, recognized by the Secretary of Veterans Affairs, or you may employ an attorney to assist you with your claim. Typical examples of counsel who may be available include attorneys in private practice or legal aid services. If you desire representation, let us know and we will send you the necessary forms. If you have already designated a representative, no further action is required on your part.

C. HEARINGS. You have the right to a personal hearing at any stage of claims processing, either before or after a decision is made. This right may be exercised with regard to an original claim, supplemental claim or with regard to any subsequent action affecting your entitlement. All you need do is inform the nearest VA office as to your desires, and we will arrange a time and place for the hearing. You may bring witnesses if you desire and their testimony will be entered in the record. VA will furnish the hearing room, provide hearing officials, and prepare the transcript of the proceedings. VA cannot pay any of your expenses in connection with the hearing.

D. EVIDENCE - GENERAL. Furnish a statement from your doctor showing the extent of your disabilities with your application. If you are a nursing home patient, you should furnish a statement signed by an official of the nursing home showing the date of your admission and patient status. Also, indicate in Item 24, Remarks, that you are a nursing home patient and give the name and address of the nursing home. Be sure to include the zip code.

E. REPORTING NET WORTH FOR PENSION FOR DISABILITY NOT RESULTING FROM SERVICE. Pension cannot be paid if net worth is sizeable. Net worth is the market value of all interest or rights in any kind of property except ordinary personal effects necessary for daily living such as automobile, clothing or furniture, and the dwelling (single family unit) used as your principal residence. Therefore, all other assets must be reported so that we may determine whether net worth prevents you from receiving pension benefits.

F. INCOME LIMITS AND RATES OF PENSION. The rate of pension paid to a veteran depends upon the amount of family income and the number of dependents, according to a formula provided by law. Because benefit rates and income limits are frequently changed, it is not feasible to keep such information current in these instructions. Information regarding current income limitations and rates of benefits may be obtained by contacting your nearest VA office.

- (1) A higher rate of pension is payable to a veteran who is a patient in a nursing home or otherwise determined to be in need of regular aid and attendance or who is permanently housebound due to disability.
- (2) Pension rates are also increased for a veteran who served during the Mexican Border Period or World War I.

## IMPORTANT

THERE ARE CERTAIN TYPES OF INCOME WHICH MAY BE EXCLUDED IN DETERMINING THE INCOME COUNTABLE FOR VA PURPOSES. HOWEVER, YOU MUST REPORT THE SOURCES AND AMOUNTS OF ALL INCOME BEFORE DEDUCTIONS FOR YOURSELF, SPOUSE, AND DEPENDENT CHILDREN. WE WILL DETERMINE ANY AMOUNT

VA FORM 21-527 JUN 1997 SUPERSEDES VA FORM 21-527, NOV 1994 WHICH WILL NOT BE USED.